

## PART B - FEE(S) TRANSMITTAL

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**JUL 01 2008**

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26096 7590 04/30/2008

**CARLSON, GASKEY & OLDS, P.C.**  
**400 WEST MAPLE ROAD**  
**SUITE 350**  
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I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.

Theresa M. Palmateer

(Depositor's name)

*Theresa M. Palmateer*

(Signature)

7-1-08

(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/598,402	08/28/2006	William A. Veronesi	60469-119PUS1; 85294-US	3796

**TITLE OF INVENTION: ELECTRICAL CONNECTOR AND RESTRAINING DEVICE FOR USE WITH ELEVATOR BELTS**

APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUE FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1440	\$300	\$0	\$1740	07/30/2008
					07/01/2008 EAR06AY2 08032009 16398402	
EXAMINER	ART UNIT	CLASS-SUBCLASS				
COLON SANTANA, EDUARDO	2837	187-391000		01 FC:1501 02 FC:1504	1440.00 (P) 300.00 (T)	

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).  
 Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.  
 "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.

2. For printing on the patent front page, list  
(1) the names of up to 3 registered patent attorneys or agents OR, alternatively,  
(2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

Carlson, Gaskey & Olds  
1 \_\_\_\_\_  
2 \_\_\_\_\_  
3 \_\_\_\_\_

**3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)**

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

**(A) NAME OF ASSIGNEE**

Otis Elevator Company

**(B) RESIDENCE: (CITY AND STATE OR COUNTRY)**

Farmington, CT

Please check the appropriate assignee category or categories (will not be printed on the patent):  Individual  Corporation or other private group entity  Government

**4a. The following fee(s) are submitted:**

Issue Fee  
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A check is enclosed.  
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 The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number 501482 (enclose an extra copy of this form).

**5. Change in Entity Status (from status indicated above)**

a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27.

b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

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Authorized Signature David J. Gaskey

Date 7-1-08

Typed or printed name David J. Gaskey

Registration No. 37,139

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